

EMPLOYEE NAME AND NO.

2. REPORTING UNIT

3. PAY ROLL PERIOD

4. TOUR OF

REMARKS:

6. Approved For Release 2002/03/20 : CIA-RDP57-00984R000500120005-1										7. PRESENT										INITIALS	
IN	OUT	A	R/T	N/D	O/T	H/T	C/T	OTHER	OUT	IN	A	A/L	S/L	C/T	LWOP	AWOL	OTHER				
		S									S										
		M	8								M										
		T	8								T										
		W	8								W										
		T	8								T										
		F	8								F										
		S									S										
		S									S										
		M	8								M										
		T	8								T										
		W	8								W										
		T	8								T										
		F	8								F										
		S									S										

O. PAY PERIOD TOTALS

KEY: R/T-REGULAR TIME

O/T-OVERTIME

H/T-HOLIDAY TIME

S/L-SICK LEAVE

AWOL-ABSENT WITH-

N/D-NIGHT DIFFERENTIAL

C/T COMPENSATORY TIME

A/L-ANNUAL LEAVE

LWOP-LEAVE WITHOUT PAY

OUT LEAVE

CERTIFY THAT THIS ABSENCE WAS DUE TO ILLNESS WHICH INCAPACITATED ME FROM DUTY.

CERTIFIED CORRECT

TELEPHONE

1. PAY ROLL CHANGE DATA

A. GRADE	B. SALARY			C. TAX CODE		D. ALLOTT. NO.			E. CHANGE SLIP NO.		
	BASE PAY	OVERTIME	OTHER	GROSS	TAX	RET.	BONDS	F.I.C.A.	S & Q	OTHER	NET PAY
2. PREVIOUS NORMAL											
3. NEW NORMAL											
4. PAY THIS PERIOD											

1. ☐ PROMOTION☐ PERIODIC STEP INCREASE☐ PAY ADJUSTMENT☐ OTHER INCREASE

J. EFFECTIVE DATE

K. NEW SALARY RATE

L. REMARKS

M. AUDITED BY